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Effective 10/1/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 2,100.00

Complete if Known

Application Number	10/600,712
Filing Date	23 June 2003
First Named Inventor	DUBE, Michael F.
Examiner Name	WALLS, Dionne
Art Unit	1731
Attorney Docket No.	14150-00601

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 03-2469 Deposit Account Name: COLLIER SHANNON SCOTT

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
59 - 20 or HP = 13	x 50 =	650.00
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
8 - 3 or HP = 5	x 200 =	1,000.00
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = / 50 = (round up to a whole number) x = Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Two-Month Extension of Time

Fees Paid (\$)

450.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 37,480	Telephone 202.342.8400
Name (Print/Type)	DAVID R. YOHANNAN, ESQUIRE	Date April 11, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re
Application of: M. F. DUBE et al. Examiner: D. Walls
Application No.: 10/600,712 Group: 1731
Filed: June 23, 2003
For: FILTERED CIGARETTE INCORPORATING A
BREAKABLE CAPSULE
Attorney Docket #: 14150-00601

REQUEST FOR TWO MONTH EXTENSION OF TIME

Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

Receipt of the Official Communication mailed November 16, 2004 for the above-referenced application is respectfully acknowledged. Pursuant to 37 C.F.R. § 1.136(a), Applicants respectfully request a Two Month Extension of Time within which to respond to the Office Action dated November 16, 2004. Payment of the fee required pursuant to 37 C.F.R. § 1.97(a)(1) is provided herewith. A Response to the Office Action is also enclosed herewith.

Respectfully Submitted,

DAVID R. YOHANNAN, Reg. No. 37,480
COLLIER SHANNON-SCOTT, PLLC
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(202) 342-8400

Date: April 11, 2005

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